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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).						
I hereby appoint:						
Practitioners associated with the Customer Number     OR     Practitioner(s) named below (if more than ten patent processes).			75453			must be used):
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	agent(s) to represent the undersigned					
any and all patent applications assigned <u>only</u> to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).  Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:						
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Assignee Name and Address:  Zoran Corporation 1390 Kifer Road Sunnyvale, California 94086						
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.						
SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee						
Signature	(hter)		Date T	b. 4	2008	
Name	Christopher Denten		Telephone (408) 523-6500			
Title	Vice President and General Counsel, Zoran Corporation					